OLD DOMINION
U N I V E R S I T Y

FACULTY SICK LEAVE REPORT

For The Month Of _____

(All entries are the responsibility of the chair/budget unit director)

_____   _____   _____

Department   Chair/Budget Unit Director's Signature   Date

Report sick leave taken in ½ day/whole day increments. Six days of sick leave per contract year may be used for an illness/death in the faculty member's immediate family. Please designate the use of sick family leave taken as SF.

Name	Date(s) Sick Leave Taken This Month	# Days This Month	Taken Contract Year To Date	Available Balance*

*125 days of sick leave per contract year.

Revised June 1, 2008